## Case 16-05716 Doc 1 Filed 02/22/16 Entered 02/22/16 15:21:49 Desc Main Document Page 1 of 47

| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ☐ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | Chapter 13                      | Check if this an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself   |  |   |
|-----|--|--|---|
|     |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1.  | Your full name   |  |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | Derrick First name  A. Middle name  Drownes Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
| 2.  | All other names you have used in the last 8 years Include your married or  |  |   |
|     | maiden names.  |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-6593  |   |

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Case number (if known)

Debtor 1 Derrick A. Drownes

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 3937 W Flournoy St Chicago, IL 60624 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Derrick A. Drownes

| ar  | t 2: Tell the Court About  | our Bar       | nkruptcy Ca          | ise   |   |                   |                            |   |
|-----|--|---------------|----------------------|---|---|-------------------|----------------------------|---|
| 7.  | The chapter of the Bankruptcy Code you are   |               |                      |   | each, see <i>Notice Re</i> ge 1 and check the a |                   | S.C. § 342(b) for Individu | uals Filing for Bankruptcy  |
|     | choosing to file under   | ☐ Cha         | pter 7               |   |   |                   |                            |   |
|     |  | ☐ Cha         | pter 11              |   |   |                   |                            |   |
|     |  | ☐ Cha         | pter 12              |   |   |                   |                            |   |
|     |  | ■ Cha         | pter 13              |   |   |                   |                            |   |
|     |  |               |                      |   |   |                   |                            |   |
| 3.  | How you will pay the fee   | _<br>a<br>o   | bout how yo          | ou may pay. Typical attorney is submitt   | lly, if you are paying                          | the fee yourself, | , you may pay with cash    | local court for more details<br>, cashier's check, or money<br>ha credit card or check with |
|     |  |               |                      | the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay in Installments (Official Form 103A).  |   |                   |                            |   |
|     |  |               |                      | It my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may uired to, waive your fee, and may do so only if your income is less than 150% of the official poverty line the |   |                   |                            |   |
|     |  | а             | pplies to you        | ur family size and y  | ou are unable to pay                            | the fee in instal | Ilments). If you choose t  | his option, you must fill out   |
|     |  | th            | ne <i>Applicatio</i> | on to Have the Cha  | pter 7 Filing Fee Wa                            | ived (Official Fo | rm 103B) and file it with  | your petition.  |
| ).  | Have you filed for   | □ No.         |                      |   |   |                   |                            |   |
|     | bankruptcy within the last 8 years?  | Yes.          |                      |   |   |                   |                            |   |
|     |  |               | District             | ilnbke  | When  | 12/10/12          | Case number                | 12-48385  |
|     |  |               | District             |   | When  |                   | Case number                |   |
|     |  |               | District             |   | When  |                   | Case number                |   |
|     |  |               |                      |   |   |                   |                            |   |
| 10. | Are any bankruptcy   | ■ No          |                      |   |   |                   |                            |   |
|     | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes.        |                      |   |   |                   |                            |   |
|     | annate:  |               | Debtor               |   |   |                   | Relationship to y          | ou  |
|     |  |               | District             |   | When  |                   | Case number, if            |   |
|     |  |               | Debtor               |   |   |                   | Relationship to y          | ou  |
|     |  |               | District             |   | When  |                   | Case number, if            | known   |
| 11. | Do you rent your   | ■ No.         | Go to I              | ine 12.   |   |                   |                            |   |
|     | residence?   | ☐ Yes.        | Has vo               | our landlord obtaine  | d an eviction iudame                            | ent against vou a | and do you want to stay    | in your residence?  |
|     |  | <b>_</b> .03. |                      | No. Go to line 12.  | , 3   | 5 , , , , ,       | ,                          | •   |
|     |  |               |                      |   |   | n Eviction Judgm  | ent Against You (Form      | 101A) and file it with this   |
|     |  |               |                      | ,, ,  |   |                   |                            |   |

|          |                    | Document | Page 4 01 47           |  |
|----------|--------------------|----------|------------------------|--|
| Debtor 1 | Derrick A. Drownes |          | Case number (if known) |  |

| art  | 3: Report About Any Bu  | sinesses `             | You Own as a Sole Propri  | etor  |  |  |
|------|---|------------------------|---|---|--|--|
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.                  | Go to Part 4.   |   |  |  |
|      |   | ☐ Yes.                 | Name and location of bu   | siness  |  |  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                        | Name of business, if any  |   |  |  |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |                        | Number, Street, City, St  | ate & ZIP Code  |  |  |
|      | it to this petition.  |                        | Check the appropriate b   | ox to describe your business:   |  |  |
|      |   |                        | ☐ Health Care Bus   | iness (as defined in 11 U.S.C. § 101(27A))  |  |  |
|      |   |                        | ☐ Single Asset Rea  | al Estate (as defined in 11 U.S.C. § 101(51B))  |  |  |
|      |   |                        | ☐ Stockbroker (as)  | defined in 11 U.S.C. § 101(53A))  |  |  |
|      |   |                        | ☐ Commodity Brok  | er (as defined in 11 U.S.C. § 101(6))   |  |  |
|      |   |                        | ☐ None of the above   | ve  |  |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a <i>small business</i><br>debtor?  | deadlines<br>operation | e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of is, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B). |   |  |  |
|      | For a definition of small   | ■ No.                  | I am not filing under Cha   | apter 11.   |  |  |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                  | I am filing under Chapte Code.  | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |  |
|      |   | ☐ Yes.                 | I am filing under Chapte  | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |
| Part | A: Report if You Own or   | Have Any               | Hazardous Property or A   | ny Property That Needs Immediate Attention  |  |  |
|      | <u> </u>  |                        | Tiazardous Froperty of A  | Troporty mac recess miniculate Attention  |  |  |
| 14.  | Do you own or have any property that poses or is alleged to pose a threat of imminent and   | ■ No. □ Yes.           | What is the hazard?   |   |  |  |
|      | identifiable hazard to<br>public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |                        | If immediate attention is needed, why is it needed?   |   |  |  |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |                        | Where is the property?  | Number, Street, City, State & Zip Code  |  |  |
|      |   |                        |   |   |  |  |

Debtor 1 Derrick A. Drownes

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Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 47 Case number (if known) Debtor 1 Derrick A. Drownes Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Derrick A. Drownes Signature of Debtor 2

Executed on

MM / DD / YYYY

Derrick A. Drownes Signature of Debtor 1

Executed on February 22, 2016

MM / DD / YYYY

Debtor 1 Derrick A. Drownes

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Thomas G. Stahulak Signature of Attorney for Debtor              | Date          | February 22, 2016             |
|--|---------------|-------------------------------|
| Thomas G. Stahulak Printed name                                      |               |                               |
| Stahulak & Associates, L.L.C. / GetFiled                             |               |                               |
| 53 W. Jackson Blvd., Suite 652<br>Chicago, IL 60604                  |               |                               |
| Number, Street, City, State & ZIP Code  Contact phone (312) 662-1480 | Email address | ecf@stahulakandassociates.com |
| 6288620<br>Bar number & State  |               |                               |

|                     |                          | Docum             | ent Page 8 of 4 | .7 |                       |
|---------------------|--------------------------|-------------------|-----------------|----|-----------------------|
| Fill in this infor  | mation to identify your  | case:             |                 |    |                       |
| Debtor 1            | Derrick A. Drowne        | s                 |                 |    |                       |
|                     | First Name               | Middle Name       | Last Name       |    |                       |
| Debtor 2            |                          |                   |                 |    |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name       |    |                       |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS     |    |                       |
| Case number         |                          |                   |                 |    | ☐ Check if this is an |
| (                   |                          |                   |                 |    | amended filing        |
|                     |                          |                   |                 |    |                       |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part | 1: Summarize Your Assets   |          |                                |
|------|--|----------|--------------------------------|
|      |  |          | r assets<br>ne of what you own |
| 1.   | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$_      | 0.00                           |
|      | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$_      | 16,079.00                      |
|      | 1c. Copy line 63, Total of all property on Schedule A/B  | \$_      | 16,079.00                      |
| Part | 2: Summarize Your Liabilities  |          |                                |
|      |  |          | r liabilities<br>ount you owe  |
| 2.   | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$_      | 6,136.00                       |
| 3.   | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$_      | 0.00                           |
|      | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$_      | 13,553.00                      |
|      | Your total liabilities   | \$       | 19,689.00                      |
| Part | 3: Summarize Your Income and Expenses  |          |                                |
| 4.   | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$_      | 1,808.03                       |
| 5.   | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$_      | 1,713.03                       |
| Part | 4: Answer These Questions for Administrative and Statistical Records   |          |                                |
| 6.   | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other | schedules.                     |
| 7.   | Yes What kind of debt do you have?   |          |                                |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Debtor 1 Derrick A. Drownes

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Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

\$\_\_\_\_\_\_2,024.70

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cl | aim  |
|--|----------|------|
| From Part 4 on Schedule E/F, copy the following:   |          |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$       | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$       | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$       | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$       | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$       | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$      | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$       | 0.00 |

Document Page 10 of 47 Fill in this information to identify your case and this filing: Debtor 1 Derrick A. Drownes First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Dodge 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Charger SE Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2009 Debtor 2 only Current value of the Current value of the 144.000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$7,425.00 \$7,425.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$7,425,00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

|   | Case 16-05716  | Doc 1              | Filed 02/22/16           | Entered 02/22/16 15:21:                     | 49 Desc Main  |
|---|--|--------------------|--------------------------|---|---|
| Debtor 1  | Derrick A. Drownes   |                    | Document                 | Page 11 of 47 Case number (if k             | nown)   |
| ■ Yes.  | Describe   |                    |                          |   |   |
|   | Used pe  | ersonal hou        | sehold furniture and g   | goods/items                                 | \$380.00  |
| ■ No  |  |                    |                          | oment; computers, printers, scanners; m     | usic collections; electronic devices  |
| 8. Collecti Examp                                     | ibles of value   |                    |                          | oks, pictures, or other art objects; stamp  | , coin, or baseball card collections;   |
| 9. <b>Equipm</b> Example  No                          | nent for sports and hobbie   |                    | other hobby equipment;   | bicycles, pool tables, golf clubs, skis; ca | noes and kayaks; carpentry tools;   |
| ■ No  | <b>ms</b> ples: Pistols, rifles, shotguns  Describe  | s, ammunitior      | n, and related equipmen  | t   |   |
| □ No  | es ples: Everyday clothes, furs.  Describe   | , leather coat     | s, designer wear, shoes  | , accessories                               |   |
|   | Used pe  | ersonal cloth      | ning and accessories     |   | \$290.00  |
| ■ No □ Yes.  13. Non-fa Exam  ■ No □ Yes.  14. Any ot | ples: Everyday jewelry, cost  Describe  arm animals  ples: Dogs, cats, birds, hors  Describe | es<br>old items yo |                          | ding rings, heirloom jewelry, watches, go   |   |
|   | the dollar value of all of yo<br>art 3. Write that number h                                  |                    |                          | ny entries for pages you have attache       | \$670.00  |
|   | escribe Your Financial Assets  |                    |                          |   |   |
| Do you ov   | wn or have any legal or eq   | uitable inter      | est in any of the follow | ring?                                       | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No  | ples: Money you have in you  |                    |                          | osit box, and on hand when you file you     | · petition  |
| Official For  | m 106A/B   |                    | Schedule A/B: F          | Property                                    | page 2  |

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Case number (if known) Document Debtor 1 Derrick A. Drownes Cash on hand \$5.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking and TCF Bank \$10.00 17.1. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Nο ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

| Debtor 1                  | Derrick A. Drownes  | Document  | Page 13 of 47 <sub>C</sub> | ase number (if known)     | Desc Main  |
|---------------------------|---|---|----------------------------|---------------------------|--|
| _                         | Give specific information abou  | t them  |                            | ()                        |  |
|                           | property owed to you?   |   |                            |                           | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| □ No                      | funds owed to you  Give specific information about  | them, including whether you alrea   | adv filed the returns and  | I the tax vears           |  |
|                           |   | ,   | ,                          |                           | -  |
|                           |   | 2015 Estimated tax refund   | \$7,969.00                 | Federal                   | \$7,969.00   |
| ■ No                      |   | ony, spousal support, child suppo   | rt, maintenance, divorc    | e settlement, property    | settlement   |
| Exam <sub>l</sub> ■ No    | amounts someone owes you ples: Unpaid wages, disability in benefits; unpaid loans you Give specific information | surance payments, disability bene<br>made to someone else                 | efits, sick pay, vacation  | pay, workers' comper      | sation, Social Security  |
| Exam <sub>l</sub><br>■ No |   | surance; health savings account (F  | HSA); credit, homeowne     | er's, or renter's insuran | се   |
| ⊔ Yes.                    | Name the insurance company Compan   |   | Beneficiary                | r:                        | Surrender or refund value:   |
| If you somed              |   | you from someone who has die<br>ust, expect proceeds from a life ins      |                            | urrently entitled to rece | ive property because   |
| Exam <sub>l</sub><br>■ No | • •   | er or not you have filed a lawsuit<br>sputes, insurance claims, or rights |                            | or payment                |  |
| ■ No                      | contingent and unliquidated of Describe each claim  | claims of every nature, including   | g counterclaims of the     | debtor and rights to      | set off claims   |
| ■ No                      | nancial assets you did not alro   | eady list   |                            |                           |  |
|                           |   | entries from Part 4, including an   |                            |                           | \$7,984.00   |
| Part 5: De                | escribe Any Business-Related Pro  | perty You Own or Have an Interest I                                       | n. List any real estate in | Part 1.                   |  |
|                           | · · · · · · · · · · · · · · · · · · ·   | e interest in any business-related pr                                     | operty?                    |                           |  |
|                           | o to Part 6.<br>Go to line 38.  |   |                            |                           |  |

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 Derrick A. Drownes Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 \$7,425.00 57. Part 3: Total personal and household items, line 15 \$670.00 Part 4: Total financial assets, line 36 \$7,984.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

\$16,079.00

Copy personal property total

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Desc Main

Official Form 106A/B Schedule A/B: Property page 5

Case 16-05716

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Doc 1

Filed 02/22/16

\$16,079.00

\$16,079.00

|   |                          | I A A A I II I I I | 111 11000 11000 1100 |  |
|---|--------------------------|--------------------|----------------------|--|
| Fill in this infor                      | rmation to identify your | case:              |                      |  |
| Debtor 1                                | Derrick A. Drowne        | s                  |                      |  |
|   | First Name               | Middle Name        | Last Name            |  |
| Debtor 2                                |                          |                    |                      |  |
| (Spouse if, filing)                     | First Name               | Middle Name        | Last Name            |  |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT  | OF ILLINOIS          |  |
| Case number                             |                          |                    |                      |  |
| (if known)                              |                          |                    |                      |  |
|   |                          |                    |                      |  |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

|                         | n of the property and line on<br>nat lists this property | Current value of the portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption |
|-------------------------|--|--------------------------------------|-----|---|------------------------------------|
|                         |  | Copy the value from<br>Schedule A/B  | Che | eck only one box for each exemption.                            |                                    |
| 2009 Dodge              | Charger SE 144,000 miles                                 | \$7,425.00                           |     | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Line nom derk           | oddio A/D. G. I  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2009 Dodge              | Charger SE 144,000 miles                                 | \$7,425.00                           |     | \$25.00   | 735 ILCS 5/12-1001(b)              |
| Line nom <i>Sch</i>     | euule A/B. 3. I  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Used person goods/items | al household furniture and                               | \$380.00                             |     | \$380.00  | 735 ILCS 5/12-1001(b)              |
| Line from Scho          | edule A/B: 6.1   |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| •                       | al clothing and accessories                              | \$290.00                             |     | \$290.00  | 735 ILCS 5/12-1001(a)              |
| Line nom gan            | edule AVD. 11.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Cash on han             | d<br>edule A/B: 16.1                                     | \$5.00                               |     | \$5.00  | 735 ILCS 5/12-1001(b)              |
| Line nom Sch            | Guule AV D. 10.1   |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |

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| llow exemption |
|----------------|
| 001(b)         |
| 001(b)         |
|                |
|                |
| 001(g)(1)      |
|                |
|                |

| Cas  | se 16-05716               | Doc 1 Filed 02/22/   |                       | ed 02/22/16 15:2  | 21:49 Desc N                                 | <i>l</i> lain            |
|--|---------------------------|--|-----------------------|---|--|--------------------------|
| Fill in this inform                        | ation to identify you     |  | Fau <del>c</del>      | 7 ()) 47  |  |                          |
| Debtor 1                                   | Derrick A. Drown          | Niddle Name  | Last Name             |   |  |                          |
| Debtor 2<br>(Spouse if, filing)            | First Name                | Middle Name  | Last Name             |   |  |                          |
| United States Ban                          | kruptcy Court for the     | : NORTHERN DISTRICT OF   | FILLINOIS             |   |  |                          |
| Case number<br>(if known)                  |                           |  |                       |   | _  | if this is an            |
| Official Form                              | 106D                      |  |                       |   |  |                          |
| Schedule I                                 | D: Creditors              | Who Have Claim   | ns Secure             | d by Property   | /  | 12/15                    |
|  |                           | If two married people are filing to out, number the entries, and attac             |                       |   |  |                          |
| . Do any creditors I                       | nave claims secured b     | y your property?   |                       |   |  |                          |
| ☐ No. Check                                | this box and submit t     | his form to the court with your o  | other schedules.      | You have nothing else to                                | report on this form.                         |                          |
| Yes. Fill in                               | all of the information    | below.   |                       |   |  |                          |
| Part 1: List All                           | Secured Claims            |  |                       |   |  |                          |
| 2. List all secured c                      | laims. If a creditor has  | more than one secured claim, list th   | e creditor separate   | Column A  | Column B                                     | Column C                 |
| for each claim. If mo                      | ore than one creditor has | s a particular claim, list the other cre<br>ical order according to the creditor's | editors in Part 2. As | Amount of claim  Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 World Disc                             | ount Auto                 | Describe the property that secu  | ures the claim:       | \$6,136.00  | \$7,425.00                                   | \$0.00                   |
| Creditor's Name                            |                           | 2009 Dodge Charger SE 1 miles  | 144,000               |   |  |                          |
| 800 S. Wes<br>Chicago, IL                  |                           | As of the date you file, the claim apply.  Contingent                              | n is: Check all that  |   |  |                          |
| Number, Street,                            | City, State & Zip Code    | ☐ Unliquidated   |                       |   |  |                          |
| Who owes the dek                           | ot? Check one.            | ☐ Disputed  Nature of lien. Check all that ap                                      | pply.                 |   |  |                          |
| Debtor 1 only                              |                           | ☐ An agreement you made (such  | h as mortgage or se   | ecured  |  |                          |
| Debtor 2 only                              |                           | car loan)  |                       |   |  |                          |
| Debtor 1 and Deb                           | otor 2 only               | ☐ Statutory lien (such as tax lien   | n, mechanic's lien)   |   |  |                          |
|  | e debtors and another     | ☐ Judgment lien from a lawsuit   |                       |   |  |                          |
| Check if this cla                          |                           | Other (including a right to offset   | et) Purchase          | Money Security  |  |                          |
| Date debt was incu                         | rred 02/2016              | Last 4 digits of account   | number                |   |  |                          |
|  |                           |  |                       |   |  |                          |
| Add the dollar val                         | ue of your entries in C   | Column A on this page. Write that  | number here:          | \$6,136   | 6.00   |                          |
| If this is the last p<br>Write that number |                           | the dollar value totals from all pa  | iges.                 | \$6,136   | 6.00   |                          |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|   |  | Document   | Page 1  | 3 of 47  |  |
|---|--|--|---|--|--|
| Fill in this info   | ormation to identify your  | case:  |   |  |  |
| Debtor 1  | Derrick A. Drowne  | S  |   |  |  |
|   | First Name   | Middle Name  | Last Name   |  |  |
| Debtor 2  |  |  |   |  |  |
| (Spouse if, filing)   | First Name   | Middle Name  | Last Name   |  |  |
| United States E   | Bankruptcy Court for the:  | NORTHERN DISTRICT OF IL  | LINOIS  |  |  |
| Case number   |  |  |   |  |  |
| (if known)  |  |  |   | l n  | Check if this is an  |
|   |  |  |   |  | amended filing   |
| o · . =   | 4005/5   |  |   |  |  |
|   | rm 106E/F  |  |   |  | 4044   |
|   |  | ho Have Unsecured  |   | Part 2 for creditors with NONPRIORITY  | 12/15  |
| any executory co<br>Schedule G: Exe<br>Schedule D: Cred<br>eft. Attach the C<br>name and case n | ontracts or unexpired leases<br>cutory Contracts and Unexp<br>ditors Who Have Claims Sec | that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is le. If you have no information to re | list executory of<br>Do not include<br>needed, copy | contracts on Schedule A/B: Property (Of<br>any creditors with partially secured clai<br>the Part you need, fill it out, number the<br>do not file that Part. On the top of any a | fficial Form 106A/B) and on<br>ims that are listed in<br>e entries in the boxes on the |
|   |  |  |   |  |  |
| No. Go to   | litors have priority unsecure  | u ciaillis agailist you?   |   |  |  |
|   | ) Ραπ 2.   |  |   |  |  |
| Part 2: List  | All of Your NONPRIORIT   | V Unecoured Claims   |   |  |  |
|   | litors have nonpriority unsec  |  |   |  |  |
|   |  |  |   |  |  |
| □ No. You I   | have nothing to report in this p   | art. Submit this form to the court with  | n your other sche                                   | dules.   |  |
| Yes.  |  |  |   |  |  |
| unsecured c   | laim, list the creditor separately   | y for each claim. For each claim liste   | d, identify what t                                  | b holds each claim. If a creditor has more<br>ype of claim it is. Do not list claims already<br>three nonpriority unsecured claims fill out                                      | y included in Part 1. If more  |
|   |  |  |   |  | Total claim  |
| 4.1 Cbe G   | Group  | Last 4 digits of acc   | count number  | 2772   | \$208.00   |
| •   | rity Creditor's Name   |  |   |  | · ·  |
| Attn: E<br>Po Bo  | Bankruptcy   | When was the deb   | t incurred?   | Opened 1/01/16   |  |
|   | loo, IA 50704  |  |   |  |  |
|   | Street City State Zlp Code   | As of the date you   | file, the claim i                                   | is: Check all that apply   |  |
| Who in  | curred the debt? Check one.  |  |   |  |  |
| Deb   | tor 1 only   | ☐ Contingent   |   |  |  |
| ☐ Deb   | tor 2 only   | ☐ Unliquidated   |   |  |  |
| ☐ Deb   | tor 1 and Debtor 2 only  | ☐ Disputed   |   |  |  |
| ☐ At le   | east one of the debtors and and  |  | RITY unsecured                                      | d claim:   |  |
|   | ck if this claim is for a com  | ,  |   |  |  |
| debt  | laim subject to offset?  | Obligations arisi report as priority cla   |   | ration agreement or divorce that you did n   | ot   |
| ■ No  | iaim subject to onsett   |  |   | g plans, and other similar debts   |  |
| ■ NO  |  | - Debte to perior  | •   | ttorney Peoples Gas Light And  |  |
| ☐ Yes   |  | Other. Specify   | Coke Co   | morney i copies das Light Allu   |  |

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| 011 4011  |  |                             |
|---|--|-----------------------------|
|   | Last 4 digits of account number  | \$8,000.00                  |
| Department of Revenue<br>PO BOX 88292             | When was the debt incurred?  |                             |
| Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply  |                             |
| <u> </u>  | ☐ Contingent   |                             |
|   |  |                             |
|   | ·  |                             |
|   | Type of NONPRIORITY unsecured claim:   |                             |
| <u> </u>  | ☐ Student loans  |                             |
| debt Is the claim subject to offset?              | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                             |
| No  | Debts to pension or profit-sharing plans, and other similar debts  |                             |
| Yes   | Other. Specify Parking Tickets/Violations  |                             |
| ComEd Nonpriority Creditor's Name                 | Last 4 digits of account number  | \$1,000.00                  |
| PO Box 6111<br>Carol Stream, IL 60197             | When was the debt incurred?  |                             |
|   | As of the date you file, the claim is: Check all that apply  |                             |
| <u> </u>  |  |                             |
|   | Contingent   |                             |
|   | Unliquidated   |                             |
|   | Disputed   |                             |
| At least one of the debtors and another           | <u> </u>   |                             |
| Check if this claim is for a community            |  |                             |
| Is the claim subject to offset?                   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                             |
| ■ No  | Debts to pension or profit-sharing plans, and other similar debts  |                             |
| Yes   | ■ Other. Specify Utility   |                             |
| FARCAS IOAN JOHN                                  | Last 4 digits of account number 8492   | \$1,000.00                  |
| Nonpriority Creditor's Name<br>c/o PERL SHELDON G | When was the debt incurred?  | * ,                         |
|   |  |                             |
| Number Street City State ZIp Code                 | As of the date you file, the claim is: Check all that apply  |                             |
| Who incurred the debt? Check one.                 | ,  |                             |
| Debtor 1 only                                     | ☐ Contingent   |                             |
| Debtor 2 only                                     | ☐ Unliquidated   |                             |
| ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed   |                             |
| ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:   |                             |
| ☐ Check if this claim is for a community          | ☐ Student loans  |                             |
| debt Is the claim subject to offset?              | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                             |
| ■ No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts   |                             |
| □Yes  | ■ Other. Specify _Judgment   |                             |
|   | PO BOX 88292 Chicago, IL 60680 Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  COMEd Nonpriority Creditor's Name PO Box 6111 Carol Stream, IL 60197 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  FARCAS IOAN JOHN Nonpriority Creditor's Name c/o PERL SHELDON G 7161 N CICERO #240 Lincolnwood, IL 60712 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 forly Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Is the claim subject to offset? No | Nonpriority Creditor's Name |

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Case number (if know)

| Debtor | 1 Derrick A. Drownes  |   | Case number (if know)   |            |  |  |  |
|--------|---|---|---|------------|--|--|--|
| 4.5    | Honor Finance Nonpriority Creditor's Name   | Last 4 digits of account number   | 8201  | \$3,318.00 |  |  |  |
|        | 1731 Central St<br>Evanston, IL 60201   | When was the debt incurred?   | Opened 3/01/08 Last Active 7/30/10  |            |  |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.               | As of the date you file, the claim  | is: Check all that apply  |            |  |  |  |
|        | Debtor 1 only   | ☐ Contingent  |   |            |  |  |  |
|        | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only                                      | ☐ Unliquidated☐ Disputed  |   |            |  |  |  |
|        | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Type of NONPRIORITY unsecured  ☐ Student loans  |   |            |  |  |  |
|        | debt Is the claim subject to offset?  | report as priority claims   | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
|        | ■ No  | Debts to pension or profit-sharing  |   |            |  |  |  |
|        | Yes   | Other. Specify Automobile   | Deficiency  |            |  |  |  |
| 4.6    | M3 Financial Services Nonpriority Creditor's Name                                 | Last 4 digits of account number   | 3832  | \$26.00    |  |  |  |
|        | 10330 W Roosevelt Rd. Suite 200<br>Westchester, IL 60154                          | When was the debt incurred?   | Opened 9/01/12  |            |  |  |  |
|        | Number Street City State ZIp Code Who incurred the debt? Check one.               | As of the date you file, the claim  | is: Check all that apply  |            |  |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent  |   |            |  |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |   |            |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |            |  |  |  |
|        | $\square$ At least one of the debtors and another                                 | Type of NONPRIORITY unsecure  |   |            |  |  |  |
|        | ☐ Check if this claim is for a community  | ☐ Student loans   |   |            |  |  |  |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                                    |   |            |  |  |  |
|        | No  | Debts to pension or profit-sharing  |   |            |  |  |  |
|        | Yes   | Other. Specify  Collection A Services   | ttorney Watermark Physician   |            |  |  |  |
| 4.7    | Onemain Financial Nonpriority Creditor's Name                                     | Last 4 digits of account number   | 5227  | \$1.00     |  |  |  |
|        | 6801 Colwell Blvd<br>Ntsb-2320<br>Irving, TX 75039                                | When was the debt incurred?   | Opened 4/01/05 Last Active 1/24/06  |            |  |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.               | As of the date you file, the claim  |   |            |  |  |  |
|        | Debtor 1 only   | ☐ Contingent  |   |            |  |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |   |            |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |            |  |  |  |
|        | $\square$ At least one of the debtors and another                                 | Type of NONPRIORITY unsecured   | d claim:  |            |  |  |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?     | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not |   |            |  |  |  |
|        | No  | report as priority claims  Debts to pension or profit-sharing plans, and other similar debts    |   |            |  |  |  |
|        | ■ No □ Yes  | Other, Specify Unsecured  | g plane, and other similar debte  |            |  |  |  |
|        | <b>□</b> 162  | Other Specify Undecured   |   |            |  |  |  |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Derrick A. Drownes

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|     |   |  |   | Total Claim   |
|-----|---|--|---|---|
| 6a. | Domestic support obligations  | 6a.  | \$  | 0.00  |
|     |   |  |   |   |
| 6b. | Taxes and certain other debts you owe the government                              | 6b.  | \$  | 0.00  |
| 6c. | Claims for death or personal injury while you were intoxicated                    | 6c.  | \$  | 0.00  |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here.           | 6d.  | \$  | 0.00  |
| 6e. | Total Priority. Add lines 6a through 6d.  | 6e.  | \$  | 0.00  |
|     |   |  |   | Total Claim   |
| 6f. | Student loans   | 6f.  | \$  | 0.00  |
|     |   |  |   |   |
| 6g. | Obligations arising out of a separation agreement or divorce that                 | 6g.  | \$  | 0.00  |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts                 | 6h.  | \$  | 0.00  |
| 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here. | 6i.  | \$  | 13,553.00   |
| 6j. | Total Nonpriority. Add lines 6f through 6i.                                       | 6j.  | \$  | 13,553.00   |
|     | 6b.<br>6c.<br>6d.<br>6e.<br>6f.<br>6g.<br>6h.                                     | <ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul> | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6a. Domestic support obligations  6a. \$  6b. Taxes and certain other debts you owe the government  6c. Claims for death or personal injury while you were intoxicated  6c. \$  6d. Other. Add all other priority unsecured claims. Write that amount here.  6d. \$  6e. Total Priority. Add lines 6a through 6d.  6f. \$  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  6h. Debts to pension or profit-sharing plans, and other similar debts  6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$ |

|   |                         | 17(7(4))))        | 111 1 7111. 7 7 (7) 47 |                      |
|---|-------------------------|-------------------|------------------------|----------------------|
| Fill in this infor                      | mation to identify your | case:             |                        |                      |
| Debtor 1                                | Derrick A. Drowne       | S                 |                        |                      |
|   | First Name              | Middle Name       | Last Name              |                      |
| Debtor 2                                |                         |                   |                        |                      |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name              |                      |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS            |                      |
| Case number (if known)                  |                         |                   |                        | ☐ Check if this is a |
| ` '                                     |                         |                   |                        | Oncok ii tiilo io t  |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | r company with<br>Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          |   |
| 2.2 |           |                                |   |                   |   |
|     | Name      |                                |   |                   |   |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del>_</del>                            |
| 2.3 |           |                                |   |                   |   |
| 0   | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   |   |
|     | City      |                                | State   | ZIP Code          | <del>_</del>                            |
| 2.4 | •         |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          |   |
| 2.5 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del>_</del>                            |
|     | J.,       |                                | State   |                   |   |

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|   |   |   | III Paue / 3 U   | <u> 147                                   </u>   |         |
|---|---|---|--|--|---------|
| Fill in this in   | nformation to identify your   |   |  |  |         |
| Debtor 1  | Derrick A. Drowne   | S   |  |  |         |
|   | First Name  | Middle Name   | Last Name  |  |         |
| Debtor 2<br>(Spouse if, filing)   | First Name  | Middle Name   | Last Name  |  |         |
| United State  | s Bankruptcy Court for the:   | NORTHERN DISTRICT   | OF ILLINOIS  |  |         |
|   | , ,   |   |  |  |         |
| Case numbe  | er  |   |  | ☐ Check if this is an amended filing   |         |
| Official  | Form 106H   |   |  |  |         |
|   | ıle H: Your Cod   | ebtors  |  | 12/1   | 15      |
| 1. Do your name at 1. Do you 1. Do you 1. No 1. Yes 2. Within Arizona, 1. No. G 1. Yes. I. S. In Colurin line 2 | nd case number (if known) bu have any codebtors? (If y in the last 8 years, have you California, Idaho, Louisiana, to to line 3. Did your spouse, former spou | Answer every question.  you are filing a joint case, of a lived in a community property. Nevada, New Mexico, Publish, or legal equivalent live ors. Do not include your fithat person is a guarantic. | do not list either spouse  operty state or territory erto Rico, Texas, Washi e with you at the time?  spouse as a codebtor tor or cosigner. Make s | y? (Community property states and territories include ngton, and Wisconsin.)  if your spouse is filing with you. List the person shour you have listed the creditor on Schedule D (Off | own     |
| Form 10<br>out Colu   |   | Form 106E/F), or Sched  | ule G (Official Form 10  | 6G). Use Schedule D, Schedule E/F, or Schedule G   | to fill |
|   | olumn 1: Your codebtor<br>me, Number, Street, City, State and ZI  | P Code  |  | Column 2: The creditor to whom you owe the de Check all schedules that apply:  | ∌bt     |
| Nu  | ime<br>imber Street   | Olds  | 710.0  | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line   |         |
| Cit   | у   | State   | ZIP Code   |  |         |
| 3.2   |   |   |  | ☐ Schedule D, line   |         |
| Na  | me  |   |  | ☐ Schedule E/F, line   |         |
|   | mber Street   |   |  | _  |         |
| Cit   | ·V  | State   | ZIP Code   |  |         |

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| Fill               | in this information to identify your ca  | ase:                          |   |                  |                 |  |                           |                          |               |
|--------------------|--|-------------------------------|---|------------------|-----------------|--|---------------------------|--------------------------|---------------|
| Del                | otor 1 Derrick A. Dr   | ownes                         |   |                  |                 |  |                           |                          |               |
|                    | otor 2   |                               |   |                  | _               |  |                           |                          |               |
| Uni                | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC            | T OF ILLINOIS                                   |                  |                 |  |                           |                          |               |
| (If kr             | se number  |                               |   |                  |                 | Check if this is:  An amende  A supplementation income a | ed filing                 |                          | chapter       |
|                    | fficial Form 106l  |                               |   |                  |                 | MM / DD/ Y   | YYY                       |                          |               |
| S                  | chedule I: Your Inc  | ome                           |   |                  |                 |  |                           |                          | 12/15         |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filing wi | ng jointly, and your s<br>th you, do not includ | pouse<br>e infor | is liv<br>matic | ing with you, inclu<br>on about your spo                 | ude informations. If more | on about y<br>space is n | our<br>eeded, |
| 1.                 | Fill in your employment information.   |                               | Debtor 1  |                  |                 | Debtor 2   | or non-filing             | spouse                   |               |
|                    | If you have more than one job,   |                               | ■ Employed                                      |                  |                 | _  | ☐ Employed                |                          |               |
|                    | attach a separate page with information about additional   | Employment status             | ☐ Not employed                                  |                  |                 | _ `  | ☐ Not employed            |                          |               |
|                    | employers.   | Occupation                    | Housekeeper                                     |                  |                 |  |                           |                          |               |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name               | Rush-Copley Med                                 | lical C          | ente            | r  |                           |                          |               |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address            | 2000 Ogden Ave<br>Aurora, IL 60504              |                  |                 |  |                           |                          |               |
|                    |  | How long employed th          | nere? 1 Week                                    |                  |                 |  |                           |                          |               |
| Par                | Give Details About Mor   | nthly Income                  |   |                  |                 |  |                           |                          |               |
|                    | mate monthly income as of the duse unless you are separated.   | ate you file this form. If y  | ou have nothing to re                           | port for         | any l           | line, write \$0 in the                                   | space. Include            | e your non-              | filing        |
|                    | u or your non-filing spouse have mo<br>e space, attach a separate sheet to   |                               | mbine the information                           | for all          | emplo           | oyers for that perso                                     | on on the lines           | below. If yo             | ou need       |
|                    |  |                               |   |                  |                 | For Debtor 1   | For Debtor                |                          |               |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |                               |   | 2.               | \$              | 975.00   | \$                        | N/A                      |               |
| 3.                 | Estimate and list monthly overt  | ime pay.                      |   | 3.               | +\$             | 0.00   | +\$                       | N/A                      |               |

975.00

N/A

Calculate gross Income. Add line 2 + line 3.

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| Debt | tor 1  | Derrick A. Drownes   |   | Case                          | number (if known)  |   |  |         |
|------|--|--|---|-------------------------------|--|---|--|---------|
|      | Con  | by line 4 here   | 4.  | For<br>\$                     | <b>Debtor 1</b> 975.00   |   | otor 2 or<br>ng spouse<br>N/A                        |         |
| 5    |  | all payroll deductions:  |   |                               | 070.00   | <b>—</b>  | 14/7   |         |
| 5.   | 5a.<br>5b.<br>5c.<br>5d.<br>5e.<br>5f.<br>5g.<br>5h. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:  | 5a.<br>5b.<br>5c.<br>5d.<br>5e.<br>5f.<br>5g.<br>5h.+ | \$<br>\$ \$<br>\$ \$<br>\$ \$ | 216.67<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A        |         |
| 6.   |  | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | — 6.  | \$<br>\$                      | 216.67   | \$  | N/A  |         |
| 7.   |  | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.  | * —<br>\$                     | 758.33   | \$  | N/A  |         |
| 8.   |  | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: SSI for Son  Link Benefit  Pension or retirement income  Other monthly income. Specify: | 8a.<br>8b.<br>8c.<br>8d.<br>8e.                       | \$                            | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>390.00<br>0.00 | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$                   | N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A |         |
| 9.   | Add  | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.  | \$                            | 1,049.70   | \$  | N/A  |         |
| 10.  |  | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10. \$  |                               | 1,808.03 + \$_   | 1   | N/A = \$ 1   | ,808.03 |
| 11.  | Inclu<br>othe  | te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:  | depend  |                               |  | ed in <i>Sch</i> e                              | edule J.<br>11. +\$                                  | 0.00    |
| 12.  | Writ<br>appl   | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies  you expect an increase or decrease within the year after you file this form No.   | in Liabii   |                               |  | , if it   | 12. \$1  Combined monthly in                         |         |
|      |  | NO.  |   |                               |  |   |  |         |

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|         |   |  |                                     |  |  | 1               |                 |                               |       |
|---------|---|--|-------------------------------------|--|--|-----------------|-----------------|-------------------------------|-------|
| FIII II | n this informa                                  | tion to identify yo                    | ur case:                            |  |  |                 |                 |                               |       |
| Debte   | or 1  | Derrick A. Drownes                     |                                     |  |  | eck if this is: | Ellin a         |                               |       |
| Debte   | or 2  |  |                                     |  |  |                 |                 | t showing postpetition cha    | apter |
| (Spo    | use, if filing)                                 |  |                                     |  |  | _               | 13 expenses     | as of the following date:     |       |
| Unite   | ed States Bankr                                 | uptcy Court for the:                   | NORTH                               | ERN DISTRICT OF ILLIN  | OIS                                    |                 | MM / DD / YY    | ΥΥΥ                           |       |
|         | e number<br>lown)                               |  |                                     |  |  |                 |                 |                               |       |
| Of      | ficial Fo                                       | rm 106J                                |                                     |  |  |                 |                 |                               |       |
|         |   | J: Your I                              | Exper                               | ises   |  |                 |                 |                               | 12/1  |
| Be a    | as complete a<br>rmation. If m<br>nber (if know | and accurate as                        | possible<br>eded, atta<br>y questio | . If two married people ar<br>ich another sheet to this      |  |                 |                 |                               |       |
| 1.      | Is this a joir                                  |  | iioiu                               |  |  |                 |                 |                               |       |
|         | ■ No. Go to                                     | line 2.<br>s Debtor 2 live i           | n a sonar                           | ate household?   |  |                 |                 |                               |       |
|         | □ res. <b>Doe</b>                               |  | ii a sepai                          | ate nousenoiu:   |  |                 |                 |                               |       |
|         |   |  | t file Offici                       | al Form 106J-2, Expenses                                     | for Separate House                     | ehold of De     | ebtor 2.        |                               |       |
| 2.      | Do you have                                     | e dependents?                          | □ No                                |  |  |                 |                 |                               |       |
|         | Do not list Debtor 2.                           | •                                      | Yes.                                | Fill out this information for each dependent                 | Dependent's relat<br>Debtor 1 or Debto |                 | Depender<br>age | Does dependent live with you? |       |
|         | Do not state                                    | the                                    |                                     |  |  |                 |                 | □ No                          |       |
|         | dependents                                      | names.                                 |                                     |  | Son                                    |                 | 11              | ■ Yes                         |       |
|         |   |  |                                     |  | Son                                    |                 | 12              | □ No                          |       |
|         |   |  |                                     |  | 3011                                   |                 |                 |                               |       |
|         |   |  |                                     |  |  |                 |                 | □ Yes                         |       |
|         |   |  |                                     |  |  |                 |                 | □ No                          |       |
|         |   |  |                                     |  |  |                 |                 | ☐ Yes                         |       |
| 3.      |   | enses include<br>f people other th     | nan 🔳                               | No   |  |                 |                 |                               |       |
|         |   | d your depender                        |                                     | Yes  |  |                 |                 |                               |       |
| Part    | 2: Estim  | ate Your Ongoir                        | na Month                            | ly Evnenses  |  |                 |                 |                               |       |
| Esti    | mate your ex                                    | penses as of yo                        | our bankr                           | uptcy filing date unless y<br>y is filed. If this is a supp  |  |                 |                 |                               |       |
| the v   | ude expense<br>value of sucl<br>icial Form 10   | n assistance and                       | non-cash<br>d have ind              | government assistance i<br>cluded it on <i>Schedule I:</i> \ | f you know<br>Your Income              |                 | You             | r expenses                    |       |
|         |   | ,                                      |                                     |  |  | _               |                 |                               |       |
| 4.      |   | or home owners<br>and any rent for the |                                     | ses for your residence. I<br>or lot.                         | nclude first mortgag                   | e<br>4.         | \$              | 200.00                        |       |
|         | If not includ                                   | led in line 4:                         |                                     |  |  |                 |                 |                               |       |
|         | 4a. Real e                                      | estate taxes                           |                                     |  |  | 4a.             | \$              | 0.00                          |       |
|         |   | rty, homeowner's                       |                                     |  |  | 4b.             | ·               | 0.00                          |       |
|         |   |  |                                     | upkeep expenses  |  | 4c.             | ·               | 0.00                          |       |
| 5.      |   | owner's associati<br>nortgage payme    |                                     | dominium dues<br><b>our residence,</b> such as ho            | me equity loans                        | 4d.<br>5.       |                 | 0.00                          |       |

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| Debt | or 1 Derrick A. Drownes  | Case num  | ber (if known) |                          |
|------|--|-----------|----------------|--------------------------|
| 6.   | Utilities:   |           |                |                          |
| ٥.   | 6a. Electricity, heat, natural gas   | 6a.       | \$             | 100.00                   |
|      | 6b. Water, sewer, garbage collection   | 6b.       | \$             | 0.00                     |
|      | 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.       |                | 60.00                    |
|      | 6d. Other. Specify:  | 6d.       |                | 0.00                     |
| 7.   | Food and housekeeping supplies   | _         | ·              | 458.03                   |
| 3.   | Childcare and children's education costs   | 7.<br>8.  | \$             |                          |
|      |  |           | ·              | 0.00                     |
| 9.   | Clothing, laundry, and dry cleaning  | 9.        | \$             | 100.00                   |
|      | Personal care products and services  | 10.       |                | 80.00                    |
|      | Medical and dental expenses  | 11.       | \$             | 0.00                     |
| 2.   | <b>Transportation.</b> Include gas, maintenance, bus or train fare.  | 12.       | \$             | 220.00                   |
| 2    | Do not include car payments.   | 13.       | · ·            |                          |
|      | Entertainment, clubs, recreation, newspapers, magazines, and books   |           | · -            | 0.00                     |
|      | Charitable contributions and religious donations   | 14.       | \$             | 0.00                     |
| 5.   | Insurance.   |           |                |                          |
|      | Do not include insurance deducted from your pay or included in lines 4 or 20.  | 150       | ¢              | 0.00                     |
|      | 15a. Life insurance  | 15a.      |                | 0.00                     |
|      | 15b. Health insurance  | 15b.      |                | 0.00                     |
|      | 15c. Vehicle insurance   | 15c.      |                | 85.00                    |
|      | 15d. Other insurance. Specify:   | 15d.      | \$             | 0.00                     |
| 6.   | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   | _         |                |                          |
|      | Specify:   | 16.       | \$             | 0.00                     |
| 7.   | Installment or lease payments:   | _         |                |                          |
|      | 17a. Car payments for Vehicle 1  | 17a.      | \$             | 350.00                   |
|      | 17b. Car payments for Vehicle 2  | 17b.      | \$             | 0.00                     |
|      | 17c. Other. Specify:   | 17c.      | \$             | 0.00                     |
|      | 17d. Other. Specify:   | 17d.      | \$             | 0.00                     |
| 8.   | Your payments of alimony, maintenance, and support that you did not report as  | _         | · —            |                          |
| -    | deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  | 18.       | \$             | 0.00                     |
| 9.   | Other payments you make to support others who do not live with you.  |           | \$             | 0.00                     |
|      | Specify:   | 19.       |                |                          |
| 0.   | Other real property expenses not included in lines 4 or 5 of this form or on Sched   | ule I: Yo | our Income.    |                          |
|      | 20a. Mortgages on other property   | 20a.      |                | 0.00                     |
|      | 20b. Real estate taxes   | 20b.      | \$             | 0.00                     |
|      | 20c. Property, homeowner's, or renter's insurance  | 20c.      |                | 0.00                     |
|      | 20d. Maintenance, repair, and upkeep expenses  | 20d.      | ·              | 0.00                     |
|      | 20e. Homeowner's association or condominium dues   | 20a.      |                | 0.00                     |
| 1    |  |           | · -            |                          |
| 1.   | Other: Specify: Books/Supplies for dependents  | 21.       | +\$            | 60.00                    |
| 22.  | Calculate your monthly expenses  |           |                |                          |
|      | 22a. Add lines 4 through 21.   |           | \$             | 1,713.03                 |
|      | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |           | \$             | 1,7 70.00                |
|      |  |           | ·              | 4.740.00                 |
|      | 22c. Add line 22a and 22b. The result is your monthly expenses.  |           | \$             | 1,713.03                 |
| 23.  | Calculate your monthly net income.   |           | L              |                          |
|      | 23a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a.      | \$             | 1,808.03                 |
|      | 23b. Copy your monthly expenses from line 22c above.   | 23b.      |                | 1,713.03                 |
|      | 200. Copy your monthly expenses from the 220 above.  | ۷۵۵.      | Ψ              | 1,113.03                 |
|      | 23c Subtract your monthly expenses from your monthly income  |           |                |                          |
|      | <ol> <li>Subtract your monthly expenses from your monthly income.</li> <li>The result is your monthly net income.</li> </ol> | 23c.      | \$             | 95.00                    |
|      | The result is your monthly net income.   |           | <u> </u>       |                          |
| 24.  | Do you expect an increase or decrease in your expenses within the year after you   | file this | form?          |                          |
|      | For example, do you expect to finish paying for your car loan within the year or do you expect your m                        |           |                | or decrease because of a |
|      | modification to the terms of your mortgage?  | 5 0 1     |                |                          |
|      | ■ No.  |           |                |                          |
|      | Yes. Explain here:   |           |                |                          |
|      | L 165.   LAPIGIT HOTO.   |           |                |                          |

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| Fill in this inform             | mation to identify your                          | case:                    |                            |                          |  |
|---------------------------------|--|--------------------------|----------------------------|--------------------------|--|
| Debtor 1                        | Derrick A. Drowne                                | S                        |                            |                          |  |
|                                 | First Name                                       | Middle Name              | Last Name                  | _                        |  |
| Debtor 2<br>(Spouse if, filing) | First Name                                       | Middle Name              | Last Name                  |                          |  |
| United States Ba                | inkruptcy Court for the:                         | NORTHERN DISTRICT        | OF ILLINOIS                |                          |  |
| Case number (if known)          |  |                          |                            |                          | ☐ Check if this is an amended filing                                       |
| Official Forn                   |  |                          |                            |                          |  |
| Declarat                        | ion About a                                      | ın Individual            | Debtor's So                | chedules                 | 12/15  |
| years, or both. 1               | or property by fraud in 8 U.S.C. §§ 152, 1341, 1 |                          | ruptcy case can result     | in fines up to \$250,00  | 00, or imprisonment for up to 20   |
| Did you pa                      | y or agree to pay some                           | one who is NOT an attor  | ney to help you fill out I | bankruptcy forms?        |  |
| ■ No                            |  |                          |                            |                          |  |
| ☐ Yes. N                        | Name of person                                   |                          |                            |                          | kruptcy Petition Preparer's Notice,<br>, and Signature (Official Form 119) |
|                                 | lty of perjury, I declare<br>e true and correct. | that I have read the sum | mary and schedules file    | ed with this declaration | on and   |
| Derrick                         | rick A. Drownes A. Drownes re of Debtor 1        |                          | X Signature of             | Debtor 2                 |  |

Date

Date February 22, 2016

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| -:      | II in this inform                 | ation to identify you                       |  |   |   |   |  |  |  |
|---------|-----------------------------------|---|--|---|---|---|--|--|--|
|         |                                   | ation to identify you                       |  |   |   |   |  |  |  |
| De      | ebtor 1                           | Derrick A. Drown                            | Middle Name  | Last Name   |   |   |  |  |  |
| 1 '     | ebtor 2<br>oouse if, filing)      | First Name                                  | Middle Name  | Last Name   |   |   |  |  |  |
| .       |                                   |   |  |   |   |   |  |  |  |
| Ur      | nited States Ban                  | kruptcy Court for the:                      | NORTHERN DISTRICT  | OF ILLINOIS   |   |   |  |  |  |
| 1       | ase number                        |   |  |   |   | Charlet Wilder  |  |  |  |
| (" '    | (IIOWII)                          |   |  |   |   | Check if this is an amended filing                    |  |  |  |
|         |                                   |   |  |   |   | Jan 1 and J   |  |  |  |
| $\circ$ | fficial For                       | m 107                                       |  |   |   |   |  |  |  |
|         |                                   |   | Affairs for Indivi   | duals Filing for E                                    | Bankruptcv                              | 12/1  |  |  |  |
| infe    | ormation. If me<br>mber (if known | ore space is needed.<br>). Answer every que | ible. If two married people a<br>attach a separate sheet to<br>stion.<br>arital Status and Where You | this form. On the top of ar                           |   |   |  |  |  |
| 1.      | What is your                      | current marital statu                       | ıs?  |   |   |   |  |  |  |
|         | ☐ Married                         |   |  |   |   |   |  |  |  |
|         | ■ Not marr                        | ried  |  |   |   |   |  |  |  |
| 2.      | During the la                     | st 3 years, have you                        | lived anywhere other than  | where you live now?                                   |   |   |  |  |  |
|         | □ No                              |   |  |   |   |   |  |  |  |
|         | Yes. List                         | all of the places you                       | lived in the last 3 years. Do n  | ot include where you live no                          | w.                                      |   |  |  |  |
|         | Debtor 1 Pri                      | or Address:                                 | Dates Debtor 1<br>lived there  | Debtor 2 Prior A                                      | ddress:                                 | Dates Debtor 2 lived there                            |  |  |  |
|         | 4835 W Po<br>Chicago, IL          |   | From-To:<br>01/2014 to<br>04/2014  | ☐ Same as Debtor                                      | 1                                       | ☐ Same as Debtor 1<br>From-To:                        |  |  |  |
|         | 4805 W Po<br>Chicago, IL          |   | From-To:<br>04/2014 to<br>01/2016  | ☐ Same as Debtor                                      | 1                                       | ☐ Same as Debtor 1<br>From-To:                        |  |  |  |
|         | tes and territorie  No Yes. Mal   | es include Arizona, Ca                      | llifornia, Idaho, Louisiana, Ne  | vada, New Mexico, Puerto F                            |   | erritory? (Community property<br>and Wisconsin.)      |  |  |  |
| 4.      | Fill in the total                 | I amount of income yo                       | nployment or from operatir<br>ou received from all jobs and a<br>have income that you receiv         | all businesses, including par                         | t-time activities.                      | calendar years?                                       |  |  |  |
|         | □ No                              |   |  |   |   |   |  |  |  |
|         | Yes. Fill                         | in the details.                             |  |   |   |   |  |  |  |
|         |                                   |   | Debtor 1   |   | Debtor 2                                |   |  |  |  |
|         |                                   |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |  |  |  |

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Debtor 1 Derrick A. Drownes

|   | Debtor 1                                   | Debtor 1  |  |   |
|---|--|---|--|---|
|   | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ■ Wages, commissions, bonuses, tips        | \$450.00  | ☐ Wages, commissions, bonuses, tips        |   |
|   | ☐ Operating a business                     |   | ☐ Operating a business                     |   |
| For last calendar year:<br>(January 1 to December 31, 2015)             | ■ Wages, commissions, bonuses, tips        | \$20,006.00   | ☐ Wages, commissions, bonuses, tips        |   |
|   | ☐ Operating a business                     |   | ☐ Operating a business                     |   |
| For the calendar year before that: (January 1 to December 31, 2014)     | ■ Wages, commissions, bonuses, tips        | \$11,465.00   | ☐ Wages, commissions, bonuses, tips        |   |
|   | ☐ Operating a business                     |   | ☐ Operating a business                     |   |

#### Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

|   | Debtor 1<br>Sources of income<br>Describe below | Gross income<br>(before deductions and<br>exclusions) | Debtor 2<br>Sources of income<br>Describe below. | Gross income<br>(before deductions<br>and exclusions) |
|---|---|---|--|---|
| From January 1 of current year until the date you filed for bankruptcy: | SSI Benefits/VA<br>Disability                   | \$1,319.00  |  |   |
|   | Link Benefit                                    | \$780.00  |  |   |
| For last calendar year:<br>(January 1 to December 31, 2015)             | Unemployment                                    | \$4,131.00  |  |   |
|   | SSI Benefits/VA<br>Disability                   | \$7,908.00  |  |   |
|   | Link Benefit                                    | \$4,680.00  |  |   |
| For the calendar year before that: (January 1 to December 31, 2014)     | Unemployment                                    | \$5,130.00  |  |   |
|   | SSI Benefits/VA<br>Disability                   | \$7,908.00  |  |   |
|   | Link Benefit                                    | \$4,680.00  |  |   |

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Case number (if known) Document Debtor 1 Derrick A. Drownes Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more?  $\square$  No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

No

Yes. Fill in the information below.

Creditor Name and Address

Describe the Property

Date

Value of the property

Explain what happened

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Case number (if known) Document Debtor 1 Derrick A. Drownes 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You

of Taxes)

\$365.00 (\$310.00 filing fee + \$33.00 credit

report + \$7.00 copy + \$15.00 for One Year

\$365.00

STAHULAK & ASSOCIATES, L.L.C

53 W. Jackson Blvd., Suite 652

Chicago, IL 60604

02/08/2016

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Debtor 1 Derrick A. Drownes

|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You   | Description and valu transferred                                      | e of any property         | Date payment<br>or transfer was<br>made   | Amount of payment             |
|-----|---|---|---------------------------|---|-------------------------------|
|     | 001 Debtorcc, Inc.<br>372 Summit Avenue<br>Jersey City, NJ 07306  | \$15.00 Credit Coun   | seling                    | 02/12/2016                                | \$15.00                       |
| 17. | Within 1 year before you filed for bankruptcy, dipromised to help you deal with your creditors of Do not include any payment or transfer that you list. | r to make payments to   |                           | pay or transfer any prope                 | rty to anyone who             |
|     | ■ No □ Yes. Fill in the details.  |   |                           |   |                               |
|     | Person Who Was Paid<br>Address  | Description and valu transferred                                      | e of any property         | Date payment or transfer was made         | Amount of payment             |
|     |   |   |                           | maue                                      |                               |
| 18. | Within 2 years before you filed for bankruptcy, of transferred in the ordinary course of your busin   | ess or financial affairs  | ?                         |   |                               |
|     | Include both outright transfers and transfers made a include gifts and transfers that you have already list  No   |   | granting of a security in | iterest or mortgage on your               | ргорепу). Во пот              |
|     | Yes. Fill in the details.   |   |                           |   |                               |
|     | Person Who Received Transfer  | Description and valu  | e of Desc                 | ribe any property or                      | Date transfer was             |
|     | Address   | property transferred  | paym                      | nents received or debts in exchange       | made                          |
|     | Person's relationship to you  |   |                           |   |                               |
| 19. | Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protection)   |   | roperty to a self-settle  | ed trust or similar device                | of which you are a            |
|     | ■ No  |   |                           |   |                               |
|     | Yes. Fill in the details.   | December of the section of the leading                                |                           | -f1                                       | D-1- T(                       |
|     | Name of trust   | Description and valu  | e of the property tran    | sterrea                                   | Date Transfer was made        |
| Par | List of Certain Financial Accounts, Instrur   | ments, Safe Deposit Bo  | oxes, and Storage Uni     | ts  |                               |
| 20. | Within 1 year before you filed for bankruptcy, we sold, moved, or transferred?  | -   |                           |   |                               |
|     | Include checking, savings, money market, or othouses, pension funds, cooperatives, association No   |   |                           | it; shares in banks, credit               | unions, brokerage             |
|     | Yes. Fill in the details.   |   |                           |   |                               |
|     |   | st 4 digits of  | ype of account or         | Date account was                          | Last balance                  |
|     |   | •   | strument                  | closed, sold,<br>moved, or<br>transferred | before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables?  | before you filed for ba   | nkruptcy, any safe de     | posit box or other deposi                 | tory for securities,          |
|     | ■ No □ Yes. Fill in the details.  |   |                           |   |                               |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  | Who else had access<br>Address (Number, Street<br>State and ZIP Code) |                           | the contents                              | Do you still have it?         |
|     |   |   |                           |   |                               |

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| 22.  | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy |  |   |        |                                     |                       |  |  |  |
|------|--|--|---|--------|-------------------------------------|-----------------------|--|--|--|
|      | =  | No<br>Yes. Fill in the details.  |   |        |                                     |                       |  |  |  |
|      |  | me of Storage Facility dress (Number, Street, City, State and ZIP Code)  | Who else has or had access<br>to it?<br>Address (Number, Street, City,<br>State and ZIP Code) | De     | escribe the contents                | Do you still have it? |  |  |  |
| Par  | t 9:   | Identify Property You Hold or Control for  | Someone Else  |        |                                     |                       |  |  |  |
| 23.  |  | you hold or control any property that some someone.  | one else owns? Include any prop   | erty y | you borrowed from, are storing for  | , or hold in trust    |  |  |  |
|      | ■ No □ Yes. Fill in the details.   |  |   |        |                                     |                       |  |  |  |
|      | _  | rner's Name<br>dress (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)                       | De     | escribe the property                | Value                 |  |  |  |
| Par  | t 10:  | Give Details About Environmental Inform  | nation  |        |                                     |                       |  |  |  |
| For  | the p  | ourpose of Part 10, the following definitions  | s apply:  |        |                                     |                       |  |  |  |
|      | toxi<br>regi   | rironmental law means any federal, state, or<br>c substances, wastes, or material into the a<br>ulations controlling the cleanup of these su | air, land, soil, surface water, grou<br>ıbstances, wastes, or material.                       | ndwa   | ater, or other medium, including st | atutes or             |  |  |  |
|      |  | means any location, facility, or property as<br>wn, operate, or utilize it, including disposa  | <u>-</u>  | al law | , whether you now own, operate, o   | or utilize it or used |  |  |  |
|      |  | ardous material means anything an enviror<br>ardous material, pollutant, contaminant, or   |   | us wa  | aste, hazardous substance, toxic s  | substance,            |  |  |  |
| Rep  | ort a  | ll notices, releases, and proceedings that y   | ou know about, regardless of wh   | en th  | ey occurred.                        |                       |  |  |  |
| 24.  | Has  | any governmental unit notified you that yo   | ou may be liable or potentially liab  | le un  | der or in violation of an environme | ental law?            |  |  |  |
|      |  | ■ No □ Yes. Fill in the details.   |   |        |                                     |                       |  |  |  |
|      |  | me of site<br>dress (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State a<br>ZIP Code)                      | and    | Environmental law, if you know it   | Date of notice        |  |  |  |
| 25.  | Hav  | e you notified any governmental unit of any  | y release of hazardous material?  |        |                                     |                       |  |  |  |
|      |  | No   |   |        |                                     |                       |  |  |  |
|      |  | Yes. Fill in the details.  |   |        |                                     |                       |  |  |  |
|      |  | me of site<br>dress (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State &<br>ZIP Code)                      | and    | Environmental law, if you know it   | Date of notice        |  |  |  |
| 26.  | Hav  | e you been a party in any judicial or admini   | istrative proceeding under any en   | viron  | nmental law? Include settlements    | and orders.           |  |  |  |
|      |  | No<br>Yes. Fill in the details.  |   |        |                                     |                       |  |  |  |
|      |  | se Title<br>se Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)                       | Na     | ature of the case                   | Status of the case    |  |  |  |
| Par  | t 11:  | Give Details About Your Business or Co   | nnections to Any Business   |        |                                     |                       |  |  |  |
| 27.  | With   | nin 4 years before you filed for bankruptcy,  A sole proprietor or self-employed in a  | •   | -      | -                                   | / business?           |  |  |  |
|      |  | ☐ A member of a limited liability company  |   |        | •                                   |                       |  |  |  |
| Ott: | –  |  | of Financial Affairs for Individuals Fili   |        | •                                   |                       |  |  |  |

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Case number (if known) Document Debtor 1 Derrick A. Drownes ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Derrick A. Drownes Signature of Debtor 2 Derrick A. Drownes Signature of Debtor 1 Date February 22, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapte | r 7:  | Liquidation        |
|--------|-------|--------------------|
|        | \$245 | filing fee         |
|        | \$75  | administrative fee |
| +      | \$15  | trustee surcharge  |
|        | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

### (Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - Debtor's attorney received \$365.00 from Debtor(s) prior to filing of the case as an advanced payment in compensation of (1) analysis of financial situation; (2) consultation on various bankruptcy and non-bankruptcy options; (3) preparation of documents; (4) payment of filing fees; and, when applicable (5) payment of costs of credit report fees.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
  - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
  - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: February 22, 2016                       |  |  |  |
|---|--|--|--|
| Signed:                                       |  |  |  |
| /s/ Derrick A. Drownes                        | /s/ Thomas G. Stahulak                     |  |  |
| Derrick A. Drownes                            | Thomas G. Stahulak 6288620                 |  |  |
|   | Attorney for the Debtor(s)                 |  |  |
| Debtor(s)                                     |  |  |  |
| Do not sign this agreement if the amounts are | re blank. <b>Local Bankruptcy Form 23c</b> |  |  |

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B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Northern District of Illinois**

| In re       | Derrick A. Drownes  |   | Case No.  |                                     |  |  |  |
|-------------|---|---|---|-------------------------------------|--|--|--|
|             |   | Debtor(s)   | Chapter   | 13                                  |  |  |  |
|             | DISCLOSURE OF COMPE   | NSATION OF ATTOR  | RNEY FOR DI   | EBTOR(S)                            |  |  |  |
| C           | ompensation paid to me within one year before the filin   | 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that on paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |   |                                     |  |  |  |
|             | For legal services, I have agreed to accept   |   | \$  | 4,000.00                            |  |  |  |
|             | Prior to the filing of this statement I have received   |   | \$  | 0.00                                |  |  |  |
|             | Balance Due   |   | \$  | 4,000.00                            |  |  |  |
| 2. \$       | 310.00 of the filing fee has been paid.   |   |   |                                     |  |  |  |
| 3. Т        | The source of the compensation paid to me was:  |   |   |                                     |  |  |  |
|             | ■ Debtor □ Other (specify):   |   |   |                                     |  |  |  |
| 4. T        | The source of compensation to be paid to me is:   |   |   |                                     |  |  |  |
|             | ■ Debtor □ Other (specify):   |   |   |                                     |  |  |  |
| 5.          | I have not agreed to share the above-disclosed comp   | pensation with any other person u   | unless they are mem   | bers and associates of my law firm. |  |  |  |
| I           | ☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na  |   |   |                                     |  |  |  |
| <b>6.</b> ] | n return for the above-disclosed fee, I have agreed to re   | ender legal service for all aspects   | of the bankruptcy   | case, including:                    |  |  |  |
| t<br>c      | <ul> <li>Analysis of the debtor's financial situation, and render</li> <li>Preparation and filing of any petition, schedules, stated</li> <li>Representation of the debtor at the meeting of credited</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce agreements and applications as needed; por of liens on household goods.</li> </ul> | tement of affairs and plan which<br>ors and confirmation hearing, an<br>uce to market value; exemptio   | may be required;<br>d any adjourned hea<br>on planning; prepa | urings thereof;                     |  |  |  |
| 7. I        | By agreement with the debtor(s), the above-disclosed fe<br>Representation of the debtors in any disch<br>adversary proceeding.  | e does not include the following argeability actions, judicial lie  | service:<br>n avoidances, reli                                | ef from stay actions or any other   |  |  |  |
|             |   | CERTIFICATION   |   |                                     |  |  |  |
|             | certify that the foregoing is a complete statement of an ankruptcy proceeding.  | y agreement or arrangement for  | payment to me for 1   | epresentation of the debtor(s) in   |  |  |  |
| Fe          | ebruary 22, 2016  | /s/ Thomas G. Stah  | nulak   |                                     |  |  |  |
|             | nte   | Thomas G. Stahula   | ak 6288620  |                                     |  |  |  |
|             |   | Signature of Attorney Stahulak & Associa  |   | iled                                |  |  |  |
|             |   | 53 W. Jackson Blv   |   |                                     |  |  |  |
|             |   | Chicago, IL 60604   | (- (-)  | _                                   |  |  |  |
|             |   | (312) 662-1480 Fa<br>ecf@stahulakanda   | ` '   | 3                                   |  |  |  |
|             |   | Name of law firm  | ooulateo.CUIII  |                                     |  |  |  |

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### **United States Bankruptcy Court** Northern District of Illinois

| In re | Derrick A. Drownes                            |   | Case No.                       |               |
|-------|---|---|--------------------------------|---------------|
|       |   | Debtor(s)   | Chapter 13                     |               |
|       | VERI  | FICATION OF CREDITOR M  | ATRIX                          |               |
|       |   | Number of Creditors:8   |                                |               |
|       | The above-named Debtor(s) he (our) knowledge. | ereby verifies that the list of credite                         | ors is true and correct to the | ne best of my |
| Date: | February 22, 2016                             | /s/ Derrick A. Drownes  Derrick A. Drownes  Signature of Debtor |                                |               |

Cbe Group Attn: Bankruptcy Po Box 900 Waterloo, IA 50704

City of Chicago Department of Revenue PO BOX 88292 Chicago, IL 60680

ComEd PO Box 6111 Carol Stream, IL 60197

FARCAS IOAN JOHN c/o PERL SHELDON G 7161 N CICERO #240 Lincolnwood, IL 60712

Honor Finance 1731 Central St Evanston, IL 60201

M3 Financial Services 10330 W Roosevelt Rd. Suite 200 Westchester, IL 60154

Onemain Financial 6801 Colwell Blvd Ntsb-2320 Irving, TX 75039

World Discount Auto 800 S. Western Ave. Chicago, IL 60612